PRACTICAL PEARL: Developmental Delay

INTRODUCTION	 Early identification of developmental delays or disabilities is important. Timely identification leads to appropriate referrals for intervention, consideration of the etiologic diagnosis, as well as support and anticipatory guidance. Reference: Identifying Infants and Young Children With Developmental Disorders in the Medical Home: An Algorithm for
	Developmental Surveillance and Screening <u>https://pediatrics.aappublications.org/content/118/1/405</u>
INITIAL EVALUATION AND MANAGEMENT BY PRIMARY CARE	 Ongoing developmental surveillance and standardized developmental screening including the modified checklist for autism and toddlers at 18 months and two years. Sharing pertinent history and or documentation with the Developmental Clinic
WHEN TO REFER	 If a child's MCHAT-R shows concern, refer if 2 or more items are positive. Indications for further evaluation include poor joint attention, lack of showing gestures, and repetitive movements or rigid play. Skill regression at any age. Significant delay in developmental milestones, such as no two word phrases by 2 years or not walking at 18 months. High lead levels. Genetic or other conditions likely to result in significant delay. Determine the level of delay or presence of specific conditions such as Autism Spectrum Disorder, and assist in referral for services.
HOW TO REFER	• (413) 794-KIDS
WHAT TO EXPECT FROM BAYSTATE CHILDREN'S HOSPITAL VISIT	 Quality developmental assessment and reporting. Appropriate testing will be completed after an initial clinical visit. Testing may not be necessary for all children referred. Recommendations for intervention or other services Recommendations for etiologic evaluations (Genetic and /or Neurology) when significant delays are found. Ongoing follow up of developmental and behavioral concerns in collaboration with the Medical Home.